# Private Health Information Statement - Combined policy

## Silver Everyday Hospital 250 & Kick Start Extras 50

| Phoenix Health Fund Limited | *Monthly Premium* | Covers two adults & dependants, including non-student dependants (3 or more people, only 2 of whom are adults) |
|---|---|---|
| https://www.phoenixhealthfund.com.au<br>enquiries@phoenixhealthfund.com.au<br>1800 028 817 | *$570.45 #*<br>(before any rebate, loading or discount) | Available in Northern Territory<br>Closed to new members |

# You may be entitled to an Australian Government rebate on the above premium. Your premium may also include a Lifetime Health Cover loading, an age-based discount or an insurer discount. Check with your insurer for details.

This policy covers children, students up to and including the age of 24 and non-students up to and including the age of 24, as well as persons with a disability who qualify as a child, student or non-student in these age ranges.

## Hospital cover

This policy exempts you from the Medicare Levy Surcharge.

This policy provides accident cover and benefits for travel or accommodation (outside of hospital) - check with your insurer for details.

✓ **Covered**
For information on what is covered under each category, see https://privatehealth.gov.au/categories

R **Restricted**
Restricted categories partially cover your hospital costs as a private patient in a public hospital. You may incur significant expenses in a private room or private hospital.

X **Not Covered**
These categories are not covered by this policy.

### This policy ✓ **includes** cover for

| | | |
|---|---|---|
| ✓ Back, neck and spine | ✓ Eye (not cataracts) | ✓ Miscarriage and termination of pregnancy |
| ✓ Blood | ✓ Gastrointestinal endoscopy | ✓ Pain management |
| ✓ Bone, joint and muscle | ✓ Gynaecology | ✓ Plastic and reconstructive surgery (medically necessary) |
| ✓ Brain and nervous system | ✓ Heart and vascular system | ✓ Podiatric surgery (provided by a registered podiatric surgeon – limited benefits) |
| ✓ Breast surgery (medically necessary) | ✓ Hernia and appendix | ✓ Skin |
| ✓ Chemotherapy, radiotherapy and immunotherapy for cancer | ✓ Implantation of hearing devices | ✓ Tonsils, adenoids and grommets |
| ✓ Dental surgery | ✓ Joint reconstructions | R Hospital psychiatric services |
| ✓ Diabetes management (excluding insulin pumps) | ✓ Kidney and bladder | R Palliative care |
| ✓ Digestive system | ✓ Lung and chest | R Rehabilitation |
| ✓ Ear, nose and throat | ✓ Male reproductive system | |

### This policy X **does not include** cover for

| | | |
|---|---|---|
| X Assisted reproductive services | X Insulin pumps | X Pregnancy and birth |
| X Cataracts | X Joint replacements | X Sleep studies |

| | | |
|---|---|---|
| ✗ Dialysis for chronic kidney failure | ✗ Pain management with device | ✗ Weight loss surgery |

The benefits paid for hospital treatment will depend on the type of cover you purchase and whether your fund has an agreement in place with the hospital in which you are treated. See 'Agreement Hospitals' on privatehealth.gov.au for which hospitals have arrangements with your insurer – https://privatehealth.gov.au/dynamic/agreementhospitals.

Under this policy, you may have to pay out-of-pocket costs above what you get from Medicare or your private health insurer. Before you go to hospital, you should ask your doctors, hospital and health insurer about any out-of-pocket costs that may apply to you.

### The following payments may also apply for hospital admissions

**Excess:** You will have to pay an excess of $250 per admission. This is limited to a maximum of $250 per person and $500 per policy per year.

Excess payments do not apply to hospital admissions for dependants.

**Co-payments:** No co-payments

### The following waiting periods for hospital admissions apply to new or upgrading members

**Waiting periods:**

- 2 months for palliative care, rehabilitation and hospital psychiatric treatments, even if pre-existing
- 12 months for other pre-existing conditions
- 12 months for pregnancy and birth (obstetrics)
- 2 months for all other treatments

### Gap Cover

This provider offers 'known gap' or 'no gap' cover for medical bills for this product.

The Medical Costs Finder lets you find out more about the cost of specialist medical services.

### Other features of this hospital cover

Phoenix Health Hospital Cover features include... *Access Gap – Where your Doctor agrees to participate in our Access Gap Program, you can eliminate or reduce your out-of-pocket costs that you may have otherwise incurred towards your hospital procedure. *Hospital Care Programs – supporting you beyond a hospitalisation, you have access to programs designed to support your health and wellbeing before and after a hospital admission. *Full Ambulance Cover – medically required emergency and non-emergency Ambulance treatment and transport is covered on all of our Hospital Covers, Australia-wide.

## General Treatment Cover

This health insurer does not operate a preferred provider scheme.

### This policy ✓ **includes** General treatment (Extras) cover for

*Note, for items marked with an asterisk *: 100% benefit available on preventative dental services– includes items 012, 013, 111, 114, 115, 121, 161. Claimable once per appointment, up to twice per person per calendar year up to General Dental limits.*

| *Treatment* | *Waiting period (months)* | *Benefit limits (per 12 months unless otherwise stated)* | *Examples of maximum benefits* |
|---|---|---|---|
| General dental* | 2 | $500 per person | Periodic oral examination - 100% of charge<br>Scale & clean - 100% of charge<br>Fluoride treatment - 100% of charge |
| Non PBS pharmaceuticals | 2 | $200 per person<br>(combined limit for non pbs pharmaceuticals & vaccinations) | Per eligible prescription - 50% of charge |
| Physiotherapy | 2 | $400 per person<br>(combined limit for physiotherapy, chiropractic, acupuncture, remedial massage, exercise physiology & osteopathy - **Sub-limits apply**) | Initial visit - 50% of charge<br>Subsequent visit - 50% of charge |
| Chiropractic | 2 | | Initial visit - 50% of charge<br>Subsequent visit - 50% of charge |
| Acupuncture | 2 | | Initial visit - 50% of charge |

| | | | |
|---|---|---|---|
| Remedial massage | 2 | | Initial visit - 50% of charge<br>Subsequent visit - 50% of charge |
| Exercise physiology | 2 | | Initial visit - 50% of charge<br>Subsequent visit - 50% of charge |
| Osteopathy | 2 | | Initial visit - 50% of charge<br>Subsequent visit - 50% of charge |
| Vaccinations | 2 | Combined limit - see Non PBS pharmaceuticals | Per service - 50% of charge |
| *$200 sublimit for Physiotherapy/ Myotherapy & Exercise Physiology; $200 sublimit for Chiropractic, Osteopathy & Remedial Massage; up to overall combined limit of $400. *Non PBS Pharmaceuticals benefit applies after PBS co-payment is applied. | | | |

### This policy ✗ **does not include** General treatment (Extras) cover for

| | | |
|---|---|---|
| ✗ Blood glucose monitors | ✗ Major dental | ✗ Podiatry |
| ✗ Endodontic | ✗ Optical | ✗ Psychology |
| ✗ Hearing aids | ✗ Orthodontic | ✗ Other treatments - check with your insurer |

## Ambulance cover

In Northern Territory this policy provides:

**Emergency:** Unlimited with a waiting period of 1 day.

**Non-emergency:** Unlimited transport with a waiting period of 1 day, or 1 day for pre-existing conditions.

**Call-out fees:** will be paid for each attendance, including emergency treatment without transport to hospital.

### For further information about this policy see

https://phoenixhealthfund.com.au/covers-by-life-stage/

### Disclaimer

The information contained in this Private Health Information Statement was provided by the insurer and is intended as general information. It may not take into account your particular circumstances. For information please contact the insurer.